PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be a appropriate. All further correspondence in indicated unless corrected below or direct maintenance fee notifications.		Block 1, by	(a) specifying a new cor	TION FEE (if requ f maintenance fees respondence address	iired). will be ; and/o	Blocks 1 through 5 s. mailed to the current or (b) indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
FOLEY & LARDNER LLP 321 NORTH CLARK STREET SUITE 2800 CHICAGO, IL 60654-5313				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
,			L				(Depositor's name)
			-				(Signature)
	-		L				(Date)
	O. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/627,355 07/24/2003			Rodolfo Llinas		046434-0216 2328		2328
TITLE OF INVENTION: NEURO-MIMET APPLN. TYPE SMALL ENTITY		=			······································		
	15:	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
		\$755	\$300	\$0 ¬		\$1055	11/19/2010
EXAMINER COUCH AN DETER D		ART UNIT	CLASS-SUBCLASS	_			
COUGHLAN, PETER D 2129 1. Change of correspondence address or indication of "Fee Address" (37			706-014000				
CFR 1.303). Change of correspondence address (or Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Add PTO/SB/47; Rev 03-02 or more recent) at Number is required.	(1) the names of up to a gents OR, alternate (2) the name of a sing registered attorney or 2 registered patent att listed, no name will be	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) New York University New York, NY							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted: Sisue Fee							
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.							
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature Michael D. Rechting Date September 1, 2010							
Typed or printed name Michael D. Ro	Registration No. 30,128						
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE